

INDIANA ENVIRONMENTAL STEWARDSHIP PROGRAM ANNUAL PERFORMANCE REPORT

State Form 53475 (R / 11-09) INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT ENVIRONMENTAL STEWARDSHIP PROGRAM

Indiana Department of Environmental Management

Office of Pollution Prevention and Technical Assistance 100 North Senate Avenue MC 64-00, Room IGCS W041 Indianapolis, IN 46204-2251

Telephone: (800) 988-7901 FAX: (317) 233-5627 E-mail: esp@idem.IN.gov www.IN.gov/idem/4132.htm

INSTRUCTIONS: Please use this annual report form if you are a member of the Indiana Environmental Stewardship Program (ESP). Your annual performance report should be reviewed and signed by a senior manager at your facility prior to submittal. Once signed, FAX, mail, or e-mail the report to IDEM. If you have any questions, please contact the ESP program manager at 1-800-988-7901.

The Indiana ESP annual performance report should demonstrate progress toward objectives and targets AND certify ESP requirements continue to be achieved. Your annual performance report should cover the previous twelve (12) month calendar year and include the status of projects committed to in your facility's original ESP application, results of completed projects, and assurance that an annual internal environmental management system audit was conducted by your facility. Indiana ESP facilities must submit this annual performance report by April 1st of every year, for each calendar year in which the entity has been a member for at least three (3) full months.

Please do not include any confidential business information in your annual performance report. Public access laws require IDEM to make the Annual

Performance Report publicly available, which may include posting all portions of your report on the Indiana ESP Web site.
SECTION A FACILITY INFORMATION
Name of facility Frito-Lay, Inc.
Name of parent company (If applicable) PepsiCo
Street address (number and street) 323 S. County Road 300 West
City / State / ZIP code Frankfort / IN / 46041
Facility/Company Web site N/A / www.fritolay.com
CONTACT INFORMATION
Contact name (Mr. / Mrs. / Ms. / Dr.) Mr. Jason Lewis
Title Environmental Coordinator
Telephone number (765) 659-6533
FAX number (765) 654-6610
E-mail address jason.lewis@fritolay.com
Mailing address (if different from facility address)
City / State / ZIP Code
REPORTING PERIOD
Reporting period dates (<i>month</i> , <i>day</i> , <i>year</i>) 1/1/2008 - 12/31/2009
1a. Is this the third Annual Performance Report of your membership term? ☐ Yes—If yes, answer question 1b.
☑ No—If no, skip to the "Change in Information" section of this report.
1b. Do you wish to renew your Indiana Environmental Stewardship Program membership? ☐ Yes—If yes, please complete all sections of this annual report. ☐ No—If no, please complete all sections of this annual report except for Section D.
CHANGE IN INFORMATION
In your ESP application and, perhaps, in previous annual performance reports, you described what your facility does or makes. Have there been any changes or additions to your facility's list of products or activities?
☐ Yes ⊠ No
If yes, please describe them:

SECTION B

ENVIRONMENTAL MANAGEMENT SYSTEM ASSESSMENT

Why do we need this information?

What do you need to do? IDEM needs information on the performance and assessment of your Please summarize your facility's EMS assessments. Environmental Management System (EMS). Attach additional documents if more space is needed. Is your facility currently registered to a recognized third-party EMS standard? ☐ Yes—If yes, when was an EMS audit or other assessment last ☑ No—If no, when was an internal or corporate EMS audit last conducted at conducted by an independent third party at your facility? your facility? Type (e.g., ISO 14001 certification) Scope of the audit Environmental Audit Scope of the audit Month / year November / 2009 Month / year When did your facility last conduct an internal or corporate environmental compliance audit? Do not include inspections or site visits by regulatory organizations. Scope of the audit Environmental Audit Month(s) / Year(s) November / 2009 Who conducted the audit(s) (e.g., facility staff, corporate, third party) Leigh Anne Harvey, Gordon Cobb, Gordon Williams (Optional) Please describe any other audits that were conducted at your facility. Has your facility corrected all instances of potential environmental non-compliance and EMS non-conformance identified during your audits and other assessments? ☐ Yes—If yes, briefly summarize corrective actions taken and other ☐ No such instances identified. No—If no, please explain your improvements made as a result of your EMS assessment(s) or plans to correct these instances. compliance audit(s). Action plans are to be completed by 8-1-2010 Explain the emergencies experienced within the facility during the past year. Were the applicable emergency and contingency plans detailed in the EMS effective? What changes, if any, have been made to your facility's emergency or contingency plans? None N/A When was the last Senior Management review of your EMS completed? Month / Year October / 2009 Who headed the review? Name and title Mark Gilliland / Environmental Coordinator When did your facility last conduct a systematic identification or review of your environmental aspects? Month/Year October / 2009 (Optional) Please provide a narrative summary of progress made toward EMS objectives and targets other than those reported as an Environmental Performance Initiative in Section C. You may limit the summary to environmental aspects that are significant and towards which progress has been made during the last calendar year. Attach additional sheets as necessary. Progress made this year (e.g., quantitative or qualitative improvements, activities conducted) Environmental aspect **SECTION C ENVIRONMENTAL IMPROVEMENT INITIATIVE RESULTS** Why do we need this information? What do you need to do? Summarize your facility's progress on achieving the initiative you Facilities need to share the results of the environmental improvement initiative that was pursued during the reporting period. identified in the application or last year's Annual Performance Report. Category Water Use **Baseline Quantity Future Goal Quantity Current Quantity** Cost Savings Indicator Total Water Used Calendar year 2007 2009 2009 Actual quantity (per year) 532,765,244 450,000,000 452,600,000 Normalized quantity (per year) 532,765,244 450,000,000 452,600,000 Production (pounds of finished product) Basis for your normalizing factor (e.g., gallons of paint produced) Gallons Measurement unit (e.g., pounds)

Briefly describe how you achieved improvements for this environmental initiative or, if relevant, any circumstances that delayed progress.

Installed water meters at several process points to monitor and maintain water in processing. Also implemented monitoring activities and process controls to optimize water use.

Please list any state, U.S. EPA, or other partnership programs to which you are reporting this data (e.g., Energy Star, Project XL).

(Optional) If your facility has experienced continued results for environmental improvement initiatives pursued in past years of ESP membership, please share those results here.

SECTION D

Other

ENVIRONMENTAL IMPROVEMENT INITIATIVES

Why do we need this information? Facilities need to show they are committed to

What do you need to do? Identify your facility's next environmental improvement initiative. Refer to the

Environmental Performance Table and answer the following questions. improving their environmental performance. What category have you selected from the Environmental Performance Table? Energy What indicator have you selected from the Environmental Performance Table? Total (non-transportation) Energy Use All measurements should represent the performance level for the indicator across the entire facility. For many indicators, you may choose to focus your initiative on a specific subset of the indicator (e.g., a specific material, process, VOC, group of toxic air emissions, or particular waste component). Does your initiative include everything covered by the indicator (e.g., all VOCs, all non-hazardous waste), or a specific process, substance, or component (e.g., ethane, cardboard)? If your initiative is specific to a substance or component, please provide additional detail on your indicator (e.g., specific chemical to be reduced, specific waste component). Natural gas and electricity What activities or process changes do you plan to undertake at your facility to accomplish your initiative (e.g., technology changes in a particular process line, employee training)? Technology changes and maintenance practices. Does this initiative address a significant aspect in your EMS? ✓ Yes No—please explain why you believe this indicator should be included as an environmental improvement initiative: Are you subject to Federal, State, tribal, or local regulatory requirements for this indicator? Yes—please explain how your initiative exceeds regulatory requirements: Stop! If the category listed in Question 1a is Energy Use, Waste, or Air Emissions for Total Greenhouse Gases, please skip Questions 4a – 4b below and turn to Appendix 1 to complete the questions pertaining to the category you listed in Question 1a. After completing the respective table in Appendix 1, return to this section and complete questions 5 and 6. Otherwise, continue answering questions 4-6 below. 4a. What units are you using to quantify this indicator? 4b. List the baseline annual quantity of the indicator and the annual quantity you are committing to achieve by the future year. Baseline quantity Year _ Future year quantity (not including production) Year Does the quantity presented in the future quantity column represent an absolute goal or a normalized goal? Normalized goal (i.e., indexed to level of business in baseline year) Absolute goal (i.e., demonstrates improvement even if production increases) Whether your goal is absolute or normalized, you need to provide normalizing factors and normalized quantities in your annual performance reports. Please briefly describe your basis for normalizing. Examples of potential normalizing basis include: gallons of paint produced, square feet of circuit boards sold, number of patients seen, dollars of sales adjusted for inflation, or number of employees (for R&D and administrative sites only). MMBtu per pound of product produced. **SECTION E PUBLIC OUTREACH AND PERFORMANCE REPORTING** Why do we need this information? What do you need to do? IDEM needs to know how environmental Describe how the facility has shared and information was shared with the public. plans to share environmental information. Please briefly describe the activities that your facility conducted during this reporting period to interact with the community on environmental issues and to report publicly on its environmental performance. Clinton County Go Green Expo on 11-07-2009 Please indicate which of the following methods your facility plans to use to make its ESP Annual Performance Report available to the public. Please check as many as appropriate.) Open house Meetings Press releases Community advisory panel

SECTION F **ADDITIONAL INFORMATION** Why do we need this information?

This information will help IDEM to effectively manage the

What do you need to do?

Answer the questions as completely as possible. Environmental Stewardship Program.

- In addition to ESP, please list environmental awards received or voluntary programs participated in during the past twelve months. None
- Has your facility taken advantage of any ESP incentives? If so, please describe the implementation process and list additional benefits IDEM should consider. No
- If your facility was not registered to the ISO 14001 standard prior to becoming an ESP member, has ESP helped you to pursue registration? If so, how has ESP been instrumental in achieving registration?

CERTIFICATION AND PLEDGE

On behalf of (name of facility) Frito-Lay Frankfort

I certify that the information contained in this Annual Performance Report and attachments is accurate to the best of my knowledge and that this facility is, to the best of my knowledge and based on reasonable inquiry, currently in compliance with all applicable federal, state, and local environmental requirements, or has a corrective action program in place to attain compliance.

, commit to maintaining the principles and goals outlined in our Environmental Management System for our facility's Indiana Environmental Stewardship Program status. We agree to strive for full compliance with all regulations promulgated by the U.S. EPA, state, or local jurisdictions. We agree to promote the Indiana Environmental Stewardship Program and to share our success stories with other facilities. We understand that the Annual Performance Report must be submitted to IDEM by April 1st of each year and that we must reapply to the Indiana Environmental Stewardship Program every three years.

I understand that the information provided in this Annual Performance Report will be public record. I am the senior facility manager or authorized facility signatory, and fully authorized to execute this statement on behalf of the corporation or other legal entity whose facility is submitting this Annual Performance Report.

Signature Title Date (month, day, year) **Environmental Coordinator**

Printed signature

Jason Lewis

Please mail, fax, or e-mail your completed Environmental Stewardship Program Annual Performance Report to:

IDEM-OPPTA ESP Program Manager MC 64-00, Room IGCS W041 100 North Senate Avenue Indianapolis, IN 46204-2251

FAX: 317-233-5627 E-mail: esp@idem.IN.gov

Reduce h	our energy use commitment to:			
	iazardous waste 🔲 improve was	ste management methods 🔲 C	ombination of both strategies	
	- .	š <u> </u>	ŭ	
v much ener	gy of each type does your facility u	se?		
		Donalina wasa	Future vices	Units
		Baseline year 2009	Future year 2010	Units
Energy	Electricity	212009	200527	MMBtu
Generated	Steam	212000	200027	WIWIDIG
Off-Site	Total energy generated off-site	•		
	Coal			
	Natural gas	552090	516022	MMBtu
	Crude oil			
	Fuel oil			
	Diesel Propane / LPG			
	Gasoline			
	Hydrogen powered fuel cells			
Sources of	Natural gas / methane powered f	iuel		
Energy	cells			
Generated	Biomass			
On-Site	Solar			
	Wind			
	Landfill gas Geothermal			
	Hydroelectric			
	Tire derived fuel			
	Other fuel or source			
	Specify:			
	Total energy generated on-site)		
	able energy use			
otal non-re otal energy	enewable energy use			
letric tone	of CO2 equivalents			
	of CO2 equivalents			
Offset t	through purchases of electricity			
from re	enewable off-site sources			
let metric t	ons of CO2 equivalents			
Non boss	lous wasta ganaration			
	lous waste generation ease enter your facility's amount of	non-hazardous waste, broken do	wn by waste management method.	Please enter both the an
			e" is defined as all materials sent off	
	After completing the table, return to			, p
	-		-	
	our non-hazardous waste commitme			
」Reduce h	nazardous waste 🔲 Improve was	ste management methods 🔲 C	combination of both strategies	
		and a reason and months of 10		
	our waste is handled using each ma		F-st-ss	J. 14
	thod of waste managed	Baseline year	Future year	Units
	-		20	1
Met		20		
Met Landfill	_	20		
Met Landfill Incineration		20		
Landfill Incineration Reused/rec	rycled off-site	20		

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Waste - Hazardous waste generation In the table below, please enter your facility's amoun you manage currently and that you intend to manage completing the table, return to question 4 and comple	e in your future reporting year. Include	all hazardous waste that is treated	
4a. Is the goal of your hazardous waste commitmen Reduce hazardous waste Improve 4b. How much of your hazardous waste is handled	waste management methods	mbination of both strategies	
Method of waste managed	Baseline year	Future year 20	Units
Landfill			
Incineration			
Reused/recycled off-site			
Treated on-site			
Other management			
specify:			
Total hazardous waste			
Air emissions – Total greenhouse gases In the table below, please enter your facility's amoun manage currently and that you intend to manage in y application questions.			
4a. Is the goal of your Total Greenhouse Gases con Reduce energy use Reduce process	_	n of both strategies	
4b. How much greenhouse gas does your facility en	mit from each source?		

	Source	Baseline year 20	Future year 20	Units
	Stationary combustion			
	Mobile sources			
	Refrigeration/AC equipment use			
	Process/Fugitive			
Direct	Specify source:			
Emissions	Process/Fugitive			
	Specify source:			
	Process/Fugitive			
	Specify source:			
	Total direct emissions Process/Fugitive			
	Purchased electricity			
Indirect	Purchased steam			
Emissions	Purchased hot water			
	Total indirect emissions			
	Other			
	Specify source:			
Optional	Other			
Indirect	Specify source:			
Emissions	Other Specify source:			
	Total optional indirect emissions		+	
	Offsets			
Offsets	Specify source:			
	Offsets			
	Specify source:			
	Offsets			
	Specify source:			
	Total reductions from offsets			
	Total emissions less offsets			
	Total CFC			
	Total HCFC			
0	Total stationary combustion – biomass			
Supplemental Information	CO2			
	Total mobile sources – biomass CO2	<u> </u>		
	Electricity trading transactions- electricity			
	purchase for resale			